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SERIAL NO. FILING DATE **CLAIMS ONLY** APPLICANT(S) CLAIMS AFTER AFTER 2nd AMENDMENT **AS FILED** 1st AMENDMENT IND. DEP. IND. DEP. IND. DEP. DEP. IND. DEP. IND. DEP. i į ı : 1. i ı į ŧ TOTAL IND. TOTAL IND. ئے TOTAL DEP. TOTAL DEP. TOTAL 12. 23 33 4 4 2 ***

*MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

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